

# TRANSMITTAL FORM

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|  |   |                        |                       |
|--|---|------------------------|-----------------------|
| Total Number of Pages in This Submission | 4 | Application Number     | Patent#: 7,242,908    |
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|  |   | First Named Inventor   | Peter B. DARWOOD      |
|  |   | Art Unit               | 2618                  |
|  |   | Examiner Name          | T. H. Nguyen          |
|  |   | Attorney Docket Number | 562492004100          |

## ENCLOSURES (Check all that apply)

|   |   |   |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under<br>37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication<br>to TC<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please<br>identify below): <ol style="list-style-type: none"> <li>1. Request for Certificate of<br/>Correction (2 pages)</li> <li>2. Certificate of Correction (1 page)</li> </ol> |
| Remarks   |   |   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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| Date         | August 31, 2009                              | Reg. No. | 59,622 |